

HEALTH ENTITIES

COMPANY NAME: _____ **NAIC Company Code:** _____
Contact: _____ **Telephone:** _____
REQUIRED FILINGS IN THE STATE OF: Alabama **Filings Made During the Year 2004**

(1) Check- list	(2) Line #	(3) REQUIRED FILINGS FOR THE ABOVE STATE	(4) NUMBER OF COPIES*			(5) DUE DATE	(6) FORM SOURCE**	(7) APPLICABLE NOTES
			Domestic		Foreign			
			State	NAIC	State			
		I. NAIC FINANCIAL STATEMENTS						
	1	Annual Statement (8 1/2"X14")	1	1	1	3/1	NAIC	B
	1.1	Printed Investment Schedule detail (Pages E01-E26)	1	1	xxx	3/1	NAIC	B
	2	Quarterly Financial Statement (8 1/2" x 14")	1	1	xxx	5/15, 8/15, 11/15	NAIC	O
		II. NAIC SUPPLEMENTS						
	10	Actuarial Opinion	1	1	1	3/1	Company	B
	11	Investment Risk Interrogatories	1	1	xxx	4/1	NAIC	O
	12	Life Supplement	1	1	xxx	3/1	NAIC	B,O
	13	Long-term Care Experience Reporting Forms	1	1	xxx	4/1	NAIC	O
	14	Management Discussion & Analysis	1	1	N/A	4/1	Company	O
	15	Medicare Supplement Insurance Experience Exhibit	1	1	xxx	3/1	NAIC	B,O
	16	Property/Casualty Supplement	1	1	xxx	3/1	NAIC	B,O
	17	Risk-Based Capital Report	1	1	xxx	3/1	NAIC	B
	18	Supplemental Compensation Exhibit	1	N/A	N/A	3/1	NAIC	B,O
	19	SVO Compliance Certification	1	1	1	3/1, 5/15, 8/15, 11/15 Foreign 3/1 Only	NAIC	P
		III. ELECTRONIC FILING REQUIREMENTS						
	30	Annual Statement Electronic Filing	xxx	1	xxx	3/1	NAIC	
	31	March .PDF Filing	xxx	1	xxx	3/1	NAIC	
	32	Risk-Based Capital Electronic Filing	xxx	1	N/A	3/1	NAIC	
	33	Supplemental Electronic Filing	xxx	1	xxx	4/1	NAIC	
	34	Supplemental .PDF Filing	xxx	1	xxx	4/1	NAIC	
	35	June .PDF Filing	xxx	1	xxx	6/1	NAIC	
	36	Quarterly Electronic Filing	xxx	1	xzx	5/15, 8/15, 11/15	NAIC	
	37	Quarterly .PDF Filing	xxx	1	xxx	5/15, 8/15, 11/15	NAIC	
		IV. AUDITED FINANCIAL STATEMENTS						
	51	Accountants Letter of Qualifications	1	N/A	N/A		Company	O
	52	Audited Financial Statements	1	1		6/1	Company	O
	53	Audited Financial Statements Exemption Affidavit	1	N/A	N/A		Company	O
	54	Independent CPA	1	N/A	N/A		Company	O
	55	Notification of Adverse Financial Condition	1	N/A	N/A		Company	O
	56	Report of Significant Deficiencies in Internal Controls	1	N/A	N/A		Company	O
	57	Request for Exemption to File	1	N/A	N/A		Company	J,O
		V. STATE REQUIRED FILINGS						
	101	Filings Checklist (with Column 1 completed)	1	1	1		State	B
	102	State Filing Fees	1	0	1	3/1	State	C
	103	Affidavit of Filing	0	0	0		State	L
	104	Certificate of Compliance	0	0	1	3/1	State	B,Q
	105	Certificate of Deposit	0	0	1	3/1	State	B,Q
	106	Certificate of Valuation	0	0	1	3/1	State	B,Q
	107	Premium Tax	1	0	1	3/1,5/15,8/15 11/15	State	D
	108	Application For Renewal	1	0	1	3/1	State	B
	109	Official List	1	0	1	3/1	State	B

*If XXX appears in this column, this state does not require this filing, if hard copy is filed with the state of domicile and the NAIC and if the data is filed electronically with the NAIC. If N/A appears in this column, the filing is required with the domiciliary state.

**If Form Source is NAIC, the form should be obtained from the appropriate vendor.

		NOTES AND INSTRUCTIONS (A-K APPLY TO ALL FILINGS)	
	A	<p>Required Filings Contact Person:</p> <p>Ann Strickland, Examiner (334) 241-4154</p> <p>Belinda Williams, Examiner (334) 241-4162</p>	
	B	<p>Mailing Address:</p> <p>Postal Service: Alabama Department of Insurance c/o Compass Bank P. O. Box 830691 Birmingham, AL 35283-0691</p> <p>Courier Service: Alabama Department of Insurance c/o Compass Bank 701 South 32nd Street Birmingham, AL 35233</p>	
	C	<p>Mailing Address for Filing Fees:</p> <p>HMO Certificate of Authority Renewal Fee: \$205.00 HMO Annual Statement Filing Fee: \$20.00 HMDI Certificate of Authority Renewal Fee: \$505.00 HMDI Annual Statement Filing Fee: \$25.00 The Certificate of Authority Renewal Fee and Annual Statement Filing Fee must be attached to a completed Premium Tax Return and mailed to:</p> <p>Postal Service: Alabama Department of Insurance c/o Compass Bank P. O. Box 830691 Birmingham, AL 35283-0691</p> <p>HMDI \$500.00 Audit and Exam Fee and HMO \$150.00 Audit and Exam Fee must be attached to a completed Transmittal Form and mailed to:</p> <p>Postal Service: Alabama Department of Insurance c/o Compass Bank P. O. Box 830707 Birmingham, AL 35283-0707</p> <p>Courier Service: Alabama Department of Insurance c/o Compass Bank 701 South 32nd Street Birmingham, AL 35233</p>	
	D	<p>Mailing Address for Premium Tax Payments:</p> <p>Postal Service: Alabama Department of Insurance c/o Compass Bank P. O. Box 830691 Birmingham, AL 35283-0691</p> <p>Courier Service: Alabama Department of Insurance c/o Compass Bank 701 South 32nd Street Birmingham, AL 35233</p>	

		Premium Tax Payments must be attached to completed Premium Tax Returns.	
	E	<p>Delivery Instructions:</p> <p>All filings must be postmarked no later than the due date. If the due date falls on a weekend or holiday, the due date is the next business day.</p>	
	F	<p>Late Filings:</p> <p>The company's Certificate of Authority can be suspended or revoked for filing the annual statement late. Late filing of premium tax returns and late payment of premium tax brings a fine of \$1,000-\$10,000.</p>	
	G	<p>Original Signatures:</p> <p>Original signatures are required on all filings from domestic companies. Foreign companies should follow the NAIC Annual Statement Instructions.</p>	
	H	<p>Signature/Notarization/Certification:</p> <p>The President or Vice-President and Secretary or Actuary are required to file the annual statement. Must be notarized.</p>	
	I	<p>Amended Filings:</p> <p>Amended annual statements must be properly bound and mailed along with an explanation of the amendments to: 201 Monroe Street, Suite 1700, Montgomery, AL 36104.</p>	
	J	<p>Exceptions from normal filings:</p> <p>No extensions can be granted for filing the annual statements. Extension and exemption requests for filing audited financial statements must be made at least 10 days prior to the due date.</p> <p>Premium Tax and Premium Tax Returns: No Extensions.</p>	
	K	<p>Bar Codes (State or NAIC)</p> <p>The NAIC Annual Statement Instructions should be followed.</p>	
	L	<p>Affidavit of Filing and Financial Statement Attestation</p> <p>This state waives foreign insurers from filing printed quarterly statements and supplements. The Affidavit of filing is not required. Foreign insurers still must file the printed annual statement.</p>	
	M	<p>NONE Filings:</p> <p>The NAIC Annual Statement Instructions should be followed.</p>	
	N	<p>Filings new, discontinued or modified materially since last year:</p> <p>No filings have been discontinued since last year.</p>	

	O	Domestic companies should mail the Quarterly Financial Statement, supplemental filings made after 3/1, MDA, and Audited Financial Statements to the Alabama Department of Insurance at 201 Monroe Street, Suite 1700, Montgomery, AL 36104.	
	P	SVO Compliance Certification: Domestic and foreign insurers should file this with the annual statements which are sent to the address in Note B. Domestic insurers should file this with the quarterly statements which are sent to the address in Note O. Foreign insurers are not required to file this quarterly certification since they do not file quarterly statements.	
	Q	Foreign insurers should attach the Certificates to the Annual Statements which are sent to the address in Note B. Certificates which are filed after the Annual Statement filing should be sent to the Alabama Department of Insurance, 201 Monroe Street, Suite 1700, Montgomery, AL 36104.	

**General Instructions
For Companies to Use Checklist**

Please Note: This state's instructions for companies to file with the NAIC are included in this Checklist. The NAIC will send mailing labels and other information to all companies but will not be sending their own checklist this year.

Electronic Filing is intended to include filing via the Internet or filing via diskette with the NAIC. Companies that file with the NAIC via the Internet are not required to submit diskettes to the NAIC.

Column (1) (Checklist)

Companies may use the checklist to submit to a state, if the state requests it. Companies should copy the checklist and place an "x" in this column when mailing information to the state.

Column (2) (Line #)

Line # refers to a standard filing number used for easy reference. This line number may change from year to year.

Column (3) (Required Filings)

Name of item or form to be filed.

The ***Annual Statement Electronic Filing*** includes the annual statement data and all supplements due March 1, per the *Annual Statement Instructions*. This includes all detail investment schedules and other supplements for which the *Annual Statement Instructions* exempt printed detail.

The ***March .PDF Filing*** is the .pdf file for annual statement data, detail for investment schedules and supplements due March 1.

The ***Risk-Based Capital Electronic Filing*** includes all risk-based capital data.

The ***Supplemental Electronic Filing*** includes all supplements due April 1, per the *Annual Statement Instructions*.

The ***Supplemental .PDF Filing*** is the .pdf file for all supplemental schedules and exhibits due April 1.

The ***Quarterly Electronic Filing*** includes the complete quarterly filing and the PDF files for all quarterly data.

The ***Quarterly .PDF Filing*** is the .pdf file for quarterly statement data.

The ***June .PDF Filing*** is the .pdf file for the Audited Financial Statements.

Column (4) (Number of Copies)

Indicates the number of copies that each foreign or domestic company is required to file for each type of form. The Blanks (E) Task Force modified the 1999 *Annual Statement Instructions* to waive paper filings of certain NAIC supplements and certain investment schedule detail, if such investment schedule data is available to the states via the NAIC database. The checklists reflect this action taken by the Blanks (EX4) Task Force. XXX appears in the "Number of Copies" "Foreign" column for the appropriate schedules and exhibits. **Some states have chosen to waive printed quarterly and annual statements from their foreign insurers and have chosen to rely upon the NAIC database for these filings. This waiver could include supplemental annual statement filings. The XXX in this column might signify that the state has waived the paper filing of the annual statement and all supplements.**

Column (5) (Due Date)

Indicates the date on which the company must file the form.

Column (6) (Form Source)

This column contains one of three words: “NAIC,” “State,” or “Company.” If this column contains “NAIC,” the company must obtain the forms from the appropriate vendor. If this column contains “State,” the state will provide the forms with the filing instructions (generally, on the state web site). If this column contains “Company,” the company, or its representative (e.g., its CPA firm), is expected to provide the form based upon the appropriate state instructions or the NAIC *Annual Statement Instructions*.

Column (7) (Applicable Notes)

This column contains references to the Notes to the Instructions that apply to each item listed on the checklist. The company should carefully read these notes before submitting a filing.